PTO/SB/81 (11-04)
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## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	ormation unless it displays a valid OMB control number.
Filing Date	
First Named Inventor	Makoto Kawai, et al.
Title	Therapeutic Amide Derivatives
Art Unit	
Examiner Name	
Attorney Docket Number	PC26188A

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Firm or Individual	Name	David R. Kurlandsky					
Address		Pfizer, Inc. 2800 Plymouth Road	,	,			
City		Ann Arbor		State	Michigan		Zip  48105
Country		U.S.A					
Telephone		734-622-7304		Fax	734-622-29	28	
I am the: Applicant/Inv							
Assignee of Statement un	record of order 37 C	the entire interest. See 37 CFR FR 3.73(b) is enclosed. (Form	.3.71. PTO/SB/96)				
		SIGNATURE of		Assignee	of Record		
Signature		Meso Ican				Date	Jun.29,2006
Name	Makoto Kawai Telephone 81-569-74-4400						
Title and Company	Title and Company   Scientist, Pfizer Global Research and Developmenet, Nagoya, Pfizer Japan Inc.						
NOTE: Signatures of all t signature is required, see	he invento below*.	rs or assignees of record of the enti	re interest or the	eir represen	tative(s) are requi	red. Submit m	nultiple forms if more than one
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	Firm or Individual	Name	David R. Kurlandsky					
	Address		Pfizer, Inc.					•
			2800 Plymouth Road					
	City		Ann Arbor		State	Michigan		Zip 48105
	Country		U.S.A					
	Telephone		734-622-7304		Fax	734-622-29	28	
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			SIGNATURE of		ssignee	of Record		
Signat	ure	Inta	horo Kun				Date	6/29/2006
Name			iro Kawamura				Telephone	
Title ar	nd Company	Directo	r, Pfizer Global Research	n and Develo	pmen	et, Nagoya, F	fizer:Ja	apan Inc.
NOTE: signatur	Signatures of all the	ne invento below*.	s or assignees of record of the enti	re interest or their	represen	tative(s) are requir	red. Submit n	nultiple forms if more than one
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Attorney Docket Number	PC26188A

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1 71	O.K									
<b>✓</b>	OR	associa	ted with Customer Number:		28880					
Ш	Firm or Individual	Name	David R. Kurlandsky							
	Address		Pfizer, Inc.							
	6.1		2800 Plymouth Road							
	City		Ann Arbor U.S.A	***************************************	State	Michigan		Zip  4810	)5	
	Telephone		734-622-7304		Fax	734-622-292	10			
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✓	Applicant/Inve	entor.								
	Assignee of re Statement un	ecord of der 37 C	the entire interest. See 37 CFR FR 3.73(b) is enclosed. (Form I	3.71. PTO/SB/96)	)					
			SIGNATURE of	Applicant o	or Assignee	of Record				
Signat	ure	01	ato Mirista				Date	Jun.	29,20	106
Name		Asato					Telephone			
Title a	nd Company	Scienti	st, Pfizer Global Researc	h and De	velopmer				nc.	
NOTE: signatu	Signatures of all three is required, see	ne inventor	rs or assignees of record of the entir							e
	*Total of		forms are submitted.							

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**INDICATION FORM** 

Application Number	
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First Named Inventor	Makoto Kawai, et al.
Title	Therapeutic Amide Derivatives
Art Unit	
Examiner Name	
Attorney Docket Number	PC26188A

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I hereby appoin	<b>:</b> `			•		<u> </u>	
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Address		Pfizer, Inc.					
		2800 Plymouth Road					
City		Ann Arbor		State	Michigan		Zip   48105
Country		U.S.A					
Telephone		734-622-7304		Fax	734-622-29	28	
I am the:							
Applicant/li	ventor.		•				
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Cistement	211061 37 C						
		SIGNATURE of	Applicant or A	ssignee	of Record		
Signature	, de	A PROPERTY OF THE PROPERTY OF				Date	Jun.29, 2006
Name	Isao Sakurada Telephone 81-569-74-4394						
Title and Company   Scientist, Pfizer Global Research and Developmenet, Nagoya, Pfizer Japan Inc.							
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